

FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OR FEE

SCIA 23
Rev. 5/98IN UNITED STATES X MAGISTRATE DISTRICT APPEALS COURT or OTHER PANEL (Specify below)

IN THE CASE OF

USA V.S. STEVEN TUCKER

FOR

AT

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

CHARGE/OFFENSE (describe if applicable & check box →) Felony
21 USC 846 Misdemeanor

- 1 Defendant—Adult
 2 Defendant - Juvenile
 3 Appellant
 4 Probation Violator
 5 Parole Violator
 6 Habeas Petitioner
 7 2255 Petitioner
 8 Material Witness
 9 Other

DOCKET NUMBERS

Magistrate

04-817-MBB

District Court

Court of Appeals

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY**EMPLOY-
MENT**Are you now employed? Yes No Am Self-Employed

Name and address of employer:

IF YES, how much do you earn per month? \$ _____ IF NO, give month and year of last employment How much did you earn per month? \$ _____

If married is your Spouse employed? Yes No

IF YES, how much does your Spouse earn per month? \$ _____ If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____

ASSETS**OTHER
INCOME**Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? Yes No

RECEIVED

SOURCES

IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES \$ _____

**PROP-
ERTY**CASH Have you any cash on hand or money in savings or checking accounts? Yes No IF YES, state total amount \$ 25Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? Yes No

VALUE

DESCRIPTION

IF YES, GIVE THE VALUE AND \$ DESCRIBE IT

**OBLIGATIONS &
DEBTS****DEPENDENTS**

MARITAL STATUS

Total
No. of
Dependents

List persons you actually support and your relationship to them

✓ SINGLE

MARRIED

WIDOWED

SEPARATED OR

DIVORCED

{ _____ }

{ _____ }

**DEBTS &
MONTHLY
BILLS**(LIST ALL CREDITORS,
INCLUDING BANKS,
LOAN COMPANIES,
CHARGE ACCOUNTS,
ETC.)APARTMENT
OR HOME:

Creditors

Total Debt

Monthly Paymt.

\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____
\$ _____	\$ _____

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) *4/13/04*SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)*Steven Tucker*